## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

## FORM (RF-3)

## SUMMARY SHEET

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **	
Automobile Liability Private Passenger Commercial			
Automobile Physical Damag Private Passenger			
Commercial			
Liability Other Than Auto			
Burglary and Theft			
Glass			
Fidelity			
Surety			
Boiler and Machinery			
Fire	<del></del>		
Extended Coverage			
nland Marine			
Homeowners			
Commercial Multi-Peril	<del> </del>		
Crop Hail Other Medical Malpractice	4.040.070	.0.0%	
Line of Insurance	1,648,979	+2.9%	
Does filing only apply to cer Classes? If so,	tain territory (territories) or	certain	
specify: N/A			
Brief description of filing. (If	filing follows rates of an ac	dvisory	
Organization, specify organization):	base rate change for nurse	base rate change for nurse practitioners	
organización).			
*Adjusted to reflect all prior **Change in Company's pre		t from application of n	
rates.	Liberty Insurance U		
		ne of Company	
	Marian Luongo - Ass		
		Official – Title	